



Form 2

HEARING CHECKLIST

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| 1. Birth weight equal to or less than 1500 grams | _____ Yes | _____ No |
| 2. Gestational age at delivery equal to or less than 34 weeks. | _____ Yes | _____ No |
| 3. Bilirubin equal to or greater than 20 miligrams per deciliter. | _____ Yes | _____ No |
| 4. Severe asphyxia (lack of oxygen). | _____ Yes | _____ No |
| 5. Birth defect involving craniofacial structure e.g. ear anomaly; cleft lip; cleft palate. | _____ Yes | _____ No |
| 6. Bacterial Meningitis. | _____ Yes | _____ No |
| 7. Congenital Infection e.g. cytomegalovirus, Herpes, toxoplasmosis, syphilis, HIV. | _____ Yes | _____ No |
| 8. Family history of early onset hearing loss, i.e., infancy or early childhood. | _____ Yes | _____ No |
| 9. Severe head trauma. | _____ Yes | _____ No |
| 10. Isolated speech/language delay or speech delay greater than other developmental skills. | _____ Yes | _____ No |
| 11. Prolonged otitis media and/or middle ear fluid greater than 2 months. | _____ Yes | _____ No |
| 12. Administration of ototoxic drug, e.g., gentamycin, tobramycin for greater than 5 days. | _____ Yes | _____ No |
| 13. Parental concern. | _____ Yes | _____ No |
| 14. Syndrome associated with hearing loss. (Refer to following list and circle applicable syndrome.) | _____ Yes | _____ No |

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| 1. Apert Syndrome | 31. Langer-Gideon Syndrome |
| 2. Bardet-Biedl Syndrome | 32. Melas |
| 3. Brachmann-De-Lange Syndrome | 33. MERRF |
| 4. Branchio-Oto-Renal Syndrome (BOR) | 34. Miller Postaxial Acrofacial Dysostosis |
| 5. Cerebro-Costo-Mandibular Syndrome | 35. Moebius Syndrome |
| 6. Charge Association | 36. Multiple Pterygium Syndrome |
| 7. Cleidocranial Dysplasia | 37. Nager Acrofacial Dysostosis |
| 8. Cockayne Syndrome | 38. Neurofibromatosis 2 |
| 9. Coffin-Lowry Syndrome | 39. Noonan Syndrome |
| 10. Crouzon Syndrome | 40. Norrie Disease |
| 11. Cryptophthalmos | 41. Oral Facial Digital Syndrome I, IV, VI |
| 12. Diastrophic Dysplasia | 42. Osteogenesis Imperfecta |
| 13. EEC (Ectrodactyly, Ectodermal Dysplasia, Cleft Syndrome) | 43. Osteopetrosis |
| 14. Facio-Auriculo-Vertebral Dysplasia (Goldenhar Syndrome) | 44. Oto-Palatal-Digital Syndrome I, IV, VI |
| 15. Fanconi Anemia | 45. Pendred Syndrome |
| 16. Fetal Alcohol Syndrome | 46. Perrault Syndrome |
| 17. Fetal Valproate Syndrome | 47. Pfeiffer Syndrome |
| 18. Hajdu Cheney Syndrome | 48. Progeria |
| 19. Hays Wells Syndrome | 49. Refsum Syndrome |
| 20. Hunter Syndrome | 50. Saethre-Chotzen Syndrome |
| 21. Hurler Syndrome | 51. Sanfilippo Syndrome |
| 22. Hypomelanois of ITO | 52. Scheie Syndrome |
| 23. Jackson Weiss Syndrome | 53. Spondylo-Epiphyseal Dysplasia Congenita |
| 24. Jervell & Lange Nielson Syndrome | 54. Stickler Syndrome |
| 25. Johnson-blizzard Syndrome | 55. Townes-Brocks Syndrome |
| 26. Kabuki Syndrome | 56. Treacher Collins Syndrome |
| 27. Kearns-Sayne Syndrome | 57. Usher Syndrome |
| 28. Klippel-Feil Syndrome | 58. Velocardiofacial Syndrome |
| 29. Kneist Dysplasia | 59. Waardenburg Syndrome |
| 30. Lacrimo-Auriculo-Dental-Digital Syndrome (LADD) | 60. Williams Syndrome |

If no positive response to risk factors on checklist, then an informal assessment of hearing through direct observation by evaluator who has received appropriate education and has experience in evaluating developmentally age appropriate responses to auditory stimuli.

If positive response to risk factor on hearing checklist, then refer for a formal audiological screen by an audiologist; if screen is passed, no further testing is performed. If screen is **failed**, further audiological evaluation should be pursued, as indicated, and recommended by the audiologist.